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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT  Date Submitted: (use as many sheets as necessary)			PTO		Complete if Known	TPE	
			SURE	Application Number	10/573,783	4,	
			CANT	Filing Date	03/28/2006 /		
				First Named Inventor	Toru ONODERA	OCT 24 7007	
				Art Unit	1796	_ <del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</del>	
			cessary)	Examiner Name	Olga Asinovsky	\$ £/	
Sheet	1	of	1	Attorney Docket Number	023174-0157	TO TRANSMAN	

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	Cite	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	No. <sup>1</sup>	Number-Kind Code <sup>2</sup> (if known)			
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Examiner Signature	/Jeffrey Lenihan/	Date Considered	05/01/2008

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